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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration
Submitted
With Initial
Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number	KATA-190
First Named Inventor	Kazuhiko OONISHI
COMPLETE IF KNOWN	
Application Number	
Filing Date	April 12, 2004
Art Unit	
Examiner Name	

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

COATING FILM-STRIPPING SOLUTION AND COATING FILM-STRIPPING METHOD

(Title of the Invention)

the specification of which



is attached hereto

OR

was filed on (MM/DD/YYYY) as United States Application Number or PCT InternationalApplication Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? Yes	Certified Copy Attached? No
03/106550	Japan	04/10/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
04/116092	Japan	04/09/2004	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number: 000217 OR Correspondence address below

Name

Fisher, Christen & Sabol

Address

1725 K Street, N.W., Suite 1108

City

Washington

State

DC

ZIP

20006

Country

United States

Telephone

202 659-2000

Fax

202 659-2015

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any])

Kazuhiko

Family Name

86 Surname

ONISHI

Inventor's

Signature

Date

Residence: City

Kanagawa-ken

State

Country

Japan

Citizenship

Japanese

Mailing Address

17-1, Higashiyawata 4-chome, Hiratsuka-shi

City

Kanagawa-ken

State

ZIP

Country

Japan

NAME OF SECOND INVENTOR:

A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any])

Toshio

Family Name

86 Surname

SUZUKI

Inventor's

Signature

Date

Residence: City

Kanagawa-ken

State

Country

Japan

Citizenship

Japanese

Mailing Address

17-1, Higashiyawata 4-chome, Hiratsuka-shi

City

Kanagawa-ken

State

ZIP

Country

Japan

Additional inventors or a legal representative are being named on the 15 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)		Family Name or Surname	
Yoichiro		YAMAMOTO	
Inventor's Signature		Date	
Kanagawa-ken Residence: City		State	Japan Country
17-1, Higashiyawata 4-chome, Hiratsuka-shi Mailing Address		Japanese Citizenship	
Mailing Address			
Kanagawa-ken City		State	Japan Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	Country
Mailing Address		Citizenship	
Mailing Address			
City		State	Zip
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	Country
Mailing Address		Citizenship	
Mailing Address			
City		State	Zip
Country			

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Please type a plus sign (+) inside this box

PTO/SB/31 (02-01)

Approved for use through 10/31/2002 GMB 0651-0035

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POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	Kazuhiko Oonishi
Title	
Group Art Unit	
Examiner Name	
Attorney Docket Number	

I hereby appoint:

 Practitioners at Customer Number

CR

 Practitioner(s) named below:

Name	Registration Number
Virgil H. Marsh	23,083
Kara M. Armstrong	38,234

Place Customer
Number Bar Code
Label here

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

 The above-mentioned Customer Number.

CR

 Practitioners at Customer NumberPlace Customer
Number Bar Code
Label here

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Fisher Christen & Sabol		
Address	1725 K Street, N.W.		
Address	Suite 1401		
City	Washington	State	D.C.
Country	United States Of America		
Telephone	202 659-2000	Fax	202 659-2015

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Kazuhiko Oonishi	
Signature	<i>Kazuhiko Oonishi</i>	
Date	03/03/2004	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

 *Total of 3 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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PTO/SB/81 (02-01)

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POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	Kazuhiko Oonishi
Title	
Group Art Unit	
Examiner Name	
Attorney Docket Number	

I hereby appoint:

 Practitioners at Customer Number

OR

 Practitioner(s) named below:

Name	Registration Number
Virgil H. Marsh	23,083
Kara M. Armstrong	38,234

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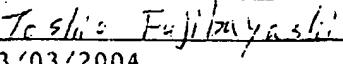
OR

<input checked="" type="checkbox"/> Firm or Individual Name	Fisher Christen & Sabol			
Address	1725 K Street, N.W.			
Address	Suite 1401			
City	Washington	State	D.C.	Zip 20006
Country	United States Of America			
Telephone	202 659-2000	Fax	202 659-2015	

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Toshio Fujibayashi	
Signature		
Date	03/03/2004	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 Two of 3 forms are submitted.

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PTO/3861 (02-01)

Approved for use through 09/30/2002 GMB 0851-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	Kazuhiko Conishi
Title	
Group Art Unit	
Examiner Name	
Attorney Docket Number	

I hereby appoint:

 Practitioners at Customer NumberPlace Customer
Number Bar Code
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OR

 Practitioner(s) named below:

Name	Registration Number
Virgil H. Marsh	23,083
Kara M. Armstrong	38,234

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

 The above-mentioned Customer Number.

OR

 Practitioners at Customer NumberPlace Customer
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OR

<input checked="" type="checkbox"/> Firm or Individual Name	Fisher Christen & Sabol			
Address	1725 K Street, N.W.			
Address	Suite 1401			
City	Washington	State	D.C.	Zip 20006
Country	United States Of America			
Telephone	202 659-2000	Fax	202 659-2015	

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Yoichiro Yamamoto
Signature	Yoichiro Yamamoto
Date	03/03/2004

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 Total of 3 forms are submitted.

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